

DEPARTMENT OF SOCIAL SERVICES

DIVISION OF FAMILY SERVICES

P.O. BOX 88

JEFFERSON CITY, MISSOURI

MEMORANDUM

AUGUST 27, 2003

TO: CHILDREN'S SERVICES STAFF AND CIRCUIT MANAGERS  
IN CIRCUITS 6, 34, 37, 42; BEV LONG AND WENDY AUSTIN.

FROM: JIM HARRISON, ASSISTANT DEPUTY DIRECTOR

SUBJECT: [MISSOURI JUVENILE JUSTICE INFORMATION SHARING  
\(MOJJIS\)](#)

REFERENCE: CHILDREN'S SERVICES

DISCUSSION:

The purpose of this memorandum is to advise staff in pilot sites of the procedures when utilizing the Missouri Juvenile Justice Information Sharing (MOJJIS) system.

**Background**

In 1995, the Juvenile Crime Bill was signed into law creating Section 210.865 RSMo mandating the sharing of juvenile related information between specific state agencies. This law states:

The juvenile divisions of the circuit courts and the departments of social services, mental health, elementary and secondary education and health shall share information regarding individual children who have come into contact with, or been provided services by, the courts and such departments. The state courts administrator and the departments of social services, mental health, elementary and secondary education and health shall

coordinate their information systems to allow for sharing of information regarding and tracking of individual children by the juvenile divisions of the circuit courts, the departments of social services, mental health, elementary and secondary education, and health, and school districts. All information received by a court, any department or any school district pursuant to this section shall remain subject to the same confidentiality requirements as are imposed on the department that originally collected the information. With regard to the information required to be shared pursuant to this section, the department of elementary and secondary education shall only share information on students who have committed an act which, if it had been committed by an adult, would be a misdemeanor or felony offense pursuant to the laws of Missouri, other states or the federal government.

The MOJJIS program was created to bring the juvenile divisions of the circuit courts and the named departments into compliance with this law. Through the program, agencies that work with juveniles are able to ensure:

- The level of provided services are appropriately coordinated and sequential;
- Marginally, or unsuccessful interventions and/or services are not unintentionally repeated;
- Youth receive appropriate services in the most efficient and effective manner possible;
- The safety of youth receiving services from the participating agencies is maintained;
- Community safety is maintained; and
- Conflicting demands that may be placed upon families receiving services can be avoided.

In August 2002, the Memorandum of Understanding (MOU) was implemented constituting an agreement between the Office of State Courts Administrator (OSCA); the Department of Social Services, the Division of Family Services (DFS); the Department of Social Services, the Division of Youth Services (DYS); the Department of Mental Health (DMH); and the Department of Health and Senior Services (DHSS) for administration of the Missouri Juvenile Justice Information Sharing Program. The new Children's Division shall adhere to the MOU. By signing the MOU, the participants agreed to abide by the following principles in regard to information sharing:

- The named agencies shall share information pertaining to juveniles for the purpose of coordinating services to said juveniles, in the spirit of Section 210.865 RSMo and in accordance with the Cooperative Agreement on Information Sharing Standards and Procedures.
- Each party agrees to maintain the confidentiality of any and all records or other information as required by applicable federal and state laws and regulations.

Although named as a participating agency in Section 210.865, the Department of Elementary and Secondary Education (DESE), having no information relevant to the object of the legislation nor need for the same from other named agencies, was declared

exempt from the terms of the Memorandum of Understanding. Should DESE become an active participant in the MOJJIS process, the Memorandum of Understanding shall be revised to include them as an agreeing party.

The Department of Mental Health (DMH) will not be fully participating in early phases or pilots of implementation, but instead will begin participation upon implementation of the new DMH information system. The initial DMH participation will be limited to information that can be shared as authorized by a written release signed by the parent, legal guardian or legal custodian of a minor child, or as ordered by a court of competent jurisdiction.

### **Why Share Information? What Does This Mean To Me?**

Utilization and participation in MOJJIS will:

- Provide for children with multiple needs because some agencies only deliver limited services
- Allow for a comprehensive assessment of children and families
- Assist with coordination of service plans
- Improve decisions about children and families
- Avoid duplication
- Avoid conflicting demands

### **When information is not shared:**

- juvenile justice systems work independently
- public safety is at risk
- child safety is at risk
- mistakes occur
- finger pointing and blaming others occurs

### **Pilot Sites:**

Pilot sites in the 6<sup>th</sup>, 34<sup>th</sup>, 37<sup>th</sup> and 42<sup>nd</sup> circuits were selected to begin MOJJIS implementation on September 1, 2003. The pilot is expected to continue at least until November 1, 2003. Trainings were held in Platte City and Poplar Bluff for juvenile court personnel, as well as staff from the Divisions of Family Services and Youth Services. Training for the point of contacts for the Department of Mental Health, Department of Health and Senior Services and the Division of Child Support Enforcement was held in Jefferson City.

In addition to the four circuits listed above, there are several juvenile courts entering juvenile information into their Juvenile Information System. Although not considered MOJJIS pilot sites, the courts in these circuits may be requesting and providing information. These circuits include 1, 3, 8, 9, 12, 14, 15, 28, 38 and 45. There are also circuits that are entering only formal court information into their system. As a result, juvenile officers in circuits 5, 13, 18, 11, 19, 20, 24, 32, 33, 35, 29 and 30 will participate primarily as information providers for formal court information.

### **Providing Information on DFS Children:**

- 1) The requestor (i.e. Juvenile Officer or other representative from participating agencies) will inquire into the MOJJIS system regarding a child. The MOJJIS system will identify if a child has DFS involvement.
- 2) The MOJJIS system will tell the requestor to email a contact person in Central Office.
- 3) The Central Office representative will confirm the identity of the requestor as a valid MOJJIS user and search the Children's Services system for information on the requested child.
- 4) The Central Office representative will send the requestor the fax number of the county that is known to have information on the child.
- 5) The requestor is responsible for faxing the Juvenile Information Request Form in the User Requirements Manual to the Circuit Manager in the appropriate county.
- 6) Upon receipt of the fax in the county office, the local office will provide the information requested, if available, and follow the tracking requirements below.

### **Tracking Requirements:**

The automated system to track disclosures has been completed. Therefore, effective immediately, if an employee discloses MOJJIS information, the disclosure should be tracked in the on-line system using PROD with a MJA0 (zero, not the letter O) transaction. Instructions for this are attached. Employees that have received the MOJJIS training, signed the confidentiality oaths and have a valid production userid will have access to the MOJJIS transactions.

Any disclosures reported on the Juvenile Information Request form in the User Requirements Manual should be entered into the new on-line tracking system. This will provide data to produce reports for accountability.

### **Requesting Information From MOJJIS:**

DFS staff requesting information from the MOJJIS system will need to log on at the following link. [MOJJIS](#) If there is information in the system regarding the child, there will be an email address to contact and how to obtain information on a specific child.

**Evaluation:**

During the pilot, an assessment and evaluation of MOJJIS will be conducted. Through the evaluation period, information will be obtained regarding:

- how MOJJIS is being used,
- the amount of traffic on the system,
- the timeliness of responses,
- types of information commonly requested,
- accuracy of the information, and
- the tracking methods of each agency.

Questions to be included in the evaluation include:

- Who is using the system and how often?
- Is the user receiving the information he/she thought the system would provide?
- Is the information received by the user beneficial for the juvenile?
- Is the response from the software and from the information providers timely and accurate?
- Is there a best practice?
- In what form is the information being shared? (fax, email, etc)
- How easy was it to log on to the system the first time the user used it?

**Necessary Action:**

1. Review this memorandum with all Children's Division staff in pilot sites.
2. Refer to the attached instructions for tracking disclosures in the automated system.
3. All questions regarding specific case situations, as related to these procedures, should be cleared through normal supervisory channels and directed to Cindy Wilkinson, Program Development Specialist, in Central Office at 573-526-0957 or [cwilkins@mail.dss.state.mo.us](mailto:cwilkins@mail.dss.state.mo.us).

JCH/CW

Attachments

**MOJJIS/PROTECTED HEALTH INFORMATION (PHI) DISCLOSURE TRACKING  
SYSTEM TRANSACTION INSTRUCTIONS**

**MOJJIS/Protected Health Information (PHI)  
Disclosure Tracking System  
Transaction Instructions**

**ADD A DISCLOSURE**

<b>MJA0</b>	<b>Add a Disclosure (Screen 1 of 2)</b>	<b>Page 2</b>
<b>MJA1</b>	<b>(Screen 2 of 2)</b>	<b>Page 5</b>

**SEARCH DISCLOSURES**

<b>MJI0</b>	<b>Search Disclosures by RACF USERID</b>	<b>Page 7</b>
<b>MJI1</b>	<b>Search Disclosures by DCN</b>	<b>Page 8</b>

**INQUIRE ON A SELECTED DISCLOSURE**

<b>MJI2</b>	<b>View Selected Disclosure (Screen 1 of 2)</b>	<b>Page 9</b>
<b>MJI3</b>	<b>(Screen 2 of 2)</b>	

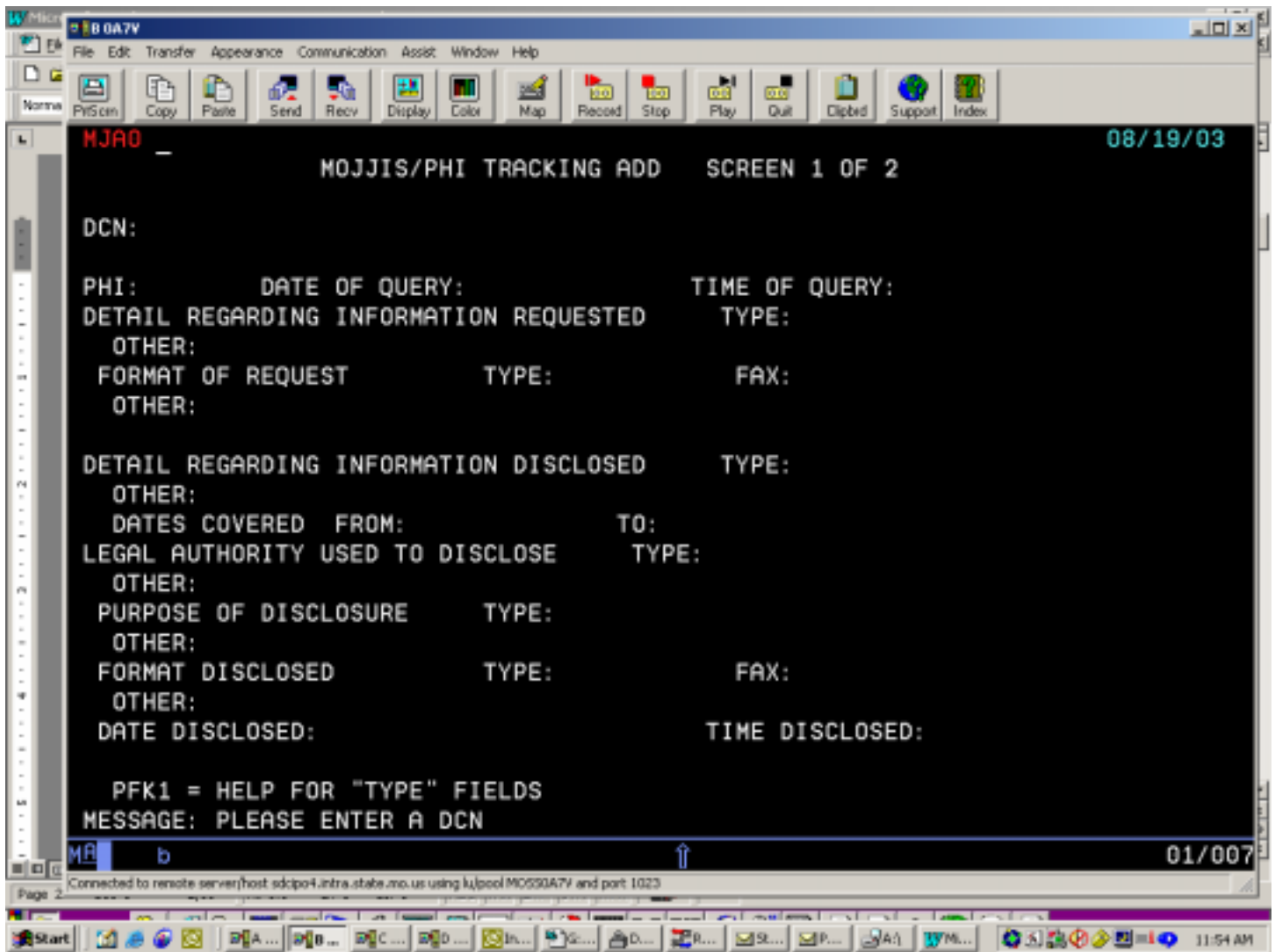
**UPDATE A SELECTED DISCLOSURE**

<b>MJU0</b>	<b>Update Selected Disclosure (Screen 1 of 2)</b>	<b>Page 9</b>
<b>MJU1</b>	<b>(Screen 2 of 2)</b>	

Please direct questions regarding when and how to complete the transactions to your Divisional MOJJIS Administrative Staff.

**NOTE: MJA0, MJI0 and MJI1 are the only enterable transactions. The other transactions can only be accessed by transferring from MJA0, MJI0 or MJI1.**

**MJA0 – ADD A DISCLOSURE for an individual DCN (Screen 1 of 2)**



**MJA0** – Enter the DCN of the individual who is the subject of disclosure.

Upon entry of a valid DCN, the transaction will return the DCN you entered, the name, social security number and the date of birth associated with the DCN.

**PHI:** Specify whether or not this is also a PHI disclosure. Valid Codes are: **Y** (yes) or **N** (no)

**DATE OF QUERY:** Format: MMDDCCYY (MM = Month, DD=Day, CC=Century, YY=Year)

**TIME OF QUERY:** PFK1 will pull up an assist box listing examples. PFK3 will close the assist code box.

Format: HHMM (hour and minutes in military time)

#### **DETAIL REGARDING INFORMATION REQUESTED**

**TYPE (REQUIRED):** Code for brief description of information being disclosed. (PFK1 will pull up an assist box listing valid TYPE codes. PFK3 will close the assist code box.) Valid Type Codes are:

- 02** - Entire record
- 10** – Court/Legal History
- 11** – Demographics
- 12** – Services Received
- 13** – Assessment
- 14** - Medical
- 99** – Other

**OTHER (REQUIRED for a 99 TYPE):** Brief description of information being disclosed.

## **MJA0 continued**

### **FORMAT REQUESTED**

**TYPE (REQUIRED):** Code for how the information was disclosed (media type). (PFK1 will pull up an assist box listing valid TYPE codes. PFK3 will close the assist code box.) Valid Type Codes are:

- 01** - Paper (mail)
- 02** - Computer Disk
- 03** - Microfiche
- 04** - Fax
- 05** - In Person
- 06** - Phone
- 07** - Email
- 99** - Other

**FAX (REQUIRED for a 04 TYPE):** Specify Fax Number (Format: 11199999999, 111=area code 999=7 digit phone number)

**OTHER (REQUIRED for a 99 TYPE):** Specify media type.

### **DETAIL REGARDING INFORMATION DISCLOSED**

**TYPE (REQUIRED):** Code for brief description of information being disclosed. (PFK1 will pull up an assist box listing valid TYPE codes. PFK3 will close the assist code box.) Valid Type Codes are:

- 01** - Claims Information
- 02** - Entire record
- 03** - Medical Diagnosis
- 10** - Court/Legal History
- 11** - Demographics
- 12** - Services Received
- 13** - Assessment
- 14** - Medical
- 99** - Other

**OTHER (REQUIRED for a 99 TYPE):** Brief description of information being disclosed.

**DATES COVERED FROM & TO (REQUIRED):** Specify the From and To dates for the information being disclosed. The From Date must be greater than 04132003, the To Date must be greater than or equal to the From Date and not greater than the current date.

Format: MMDDCCYY (MM = Month, DD=Day, CC=Century, YY=Year)

### **LEGAL AUTHORITY USED TO DISCLOSE**

**TYPE (REQUIRED):** Only required for PHI disclosures. Code for legal authority under which information was disclosed to the Agency/Company/Individual. (PFK1 will pull up an assist box listing valid TYPE codes. PFK3 will close the assist code box.) Valid Type Codes are:

- 01** - Public Health Authority
- 02** - Food & Drug Administration
- 03** - Health Oversight Agencies
- 04** - Judicial & Administrative
- 05** - Law Enforcement Officials
- 99** - Other

**OTHER (REQUIRED for a 99 TYPE):** Specify Legal Authority.

### **PURPOSE OF DISCLOSURE**

**TYPE (REQUIRED):** Code for the purpose of the request. (PFK1 will pull up an assist box listing valid TYPE codes. PFK3 will close the assist code box.) Valid Type Codes are:

- 01** - At request of the individual or  
Individual's representative
- 10** - Service Provider
- 11** - Protection/Investigation
- 99** - Other

**OTHER (REQUIRED for a 99 TYPE):** Specify Purpose.



**MJA0 continued**

**FORMAT DISCLOSED**

**TYPE (REQUIRED):** Code for how the information was disclosed (media type). (PFK1 will pull up an assist box listing valid TYPE codes. PFK3 will close the assist code box.) Valid Type Codes are:

- 01** - Paper
- 02** - Computer Disk
- 03** - Microfiche
- 04** - Fax
- 05** - In Person
- 06** - Phone
- 99** - Other

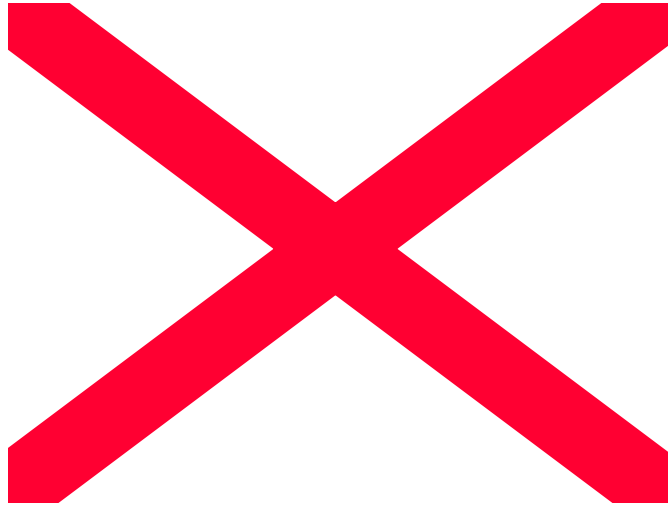
**FAX (REQUIRED for a 04 TYPE):** Specify Fax Number (Format: 111999999999, 111=area code 999=7 digit phone number)

**OTHER (REQUIRED for a 99 TYPE):** Specify media type.

**DATE DISCLOSED (REQUIRED):** This is the date the PHI information was disclosed. The date must be greater than 04132003 and not greater than the current date.

Format: MMDDCCYY (MM = Month, DD=Day, CC=Century, YY=Year)

**Note:** Once this screen is completely filled in, upon pressing the enter key, it will automatically take you to the 2<sup>nd</sup> screen MJA1. You will not be able to get back to MJA0 from MJA1. The information is not stored until you complete the MJA1 screen successfully.



**INFORMATION REGARDING AGENCY/INDIVIDUAL TO WHOM INFO WAS DISCLOSED**

<b>AGENCY (REQUIRED):</b>	This is the Agency name for which the information was disclosed to.
<b>LAST NAME (REQUIRED):</b>	This is the last name of the individual the information was disclosed to.
<b>FIRST (REQUIRED):</b>	This is the first name of the individual the information was disclosed to.
<b>MI:</b>	This is the middle initial of the individual the information was disclosed to.
<b>TITLE:</b>	This is the position or classification of the individual the information was disclosed to.
<b>ADDR1:</b>	This is the first street address of the individual the information was disclosed to.
<b>ADDR2:</b>	This is the second street address of the individual the information was disclosed to.
<b>CITY:</b>	This is the city of the individual the information was disclosed to.
<b>ST:</b>	This is the state of the individual the information was disclosed to.
<b>ZIP:</b>	This is the zip-code of the individual the information was disclosed to.
<b>PHONE:</b>	This is the phone number of the individual the information was disclosed to. (Format: 11199999999, 111=area code 999=7 digit phone number)

## **MJA1 continued**

**REQUESTOR NAME LAST:** This is the last name of the individual who requested the disclosure. If a last name is not entered, the last name of the individual who the information was disclosed to will be stored in this field.

**FIRST:** This is the first name of the individual who requested the disclosure. If a first name is not entered, the first name of the individual who the information was disclosed to will be stored in this field.

**MI:** This is the middle initial of the individual who requested the disclosure. If the middle initial is not entered, the middle initial of the individual who the information was disclosed to will be stored in this field.

## **DETAILS REGARDING EMPLOYEE THAT DISCLOSED INFORMATION**

**LAST NAME (REQUIRED):** This is the last name of the individual who disclosed the PHI information.

**FIRST (REQUIRED):** This is the first name of the individual who disclosed the PHI information.

**MI:** This is the middle initial of the individual who disclosed the PHI information.

**USERID:** This is the RACF USERID of the individual who disclosed the PHI information. This must be a valid RACF USERID.

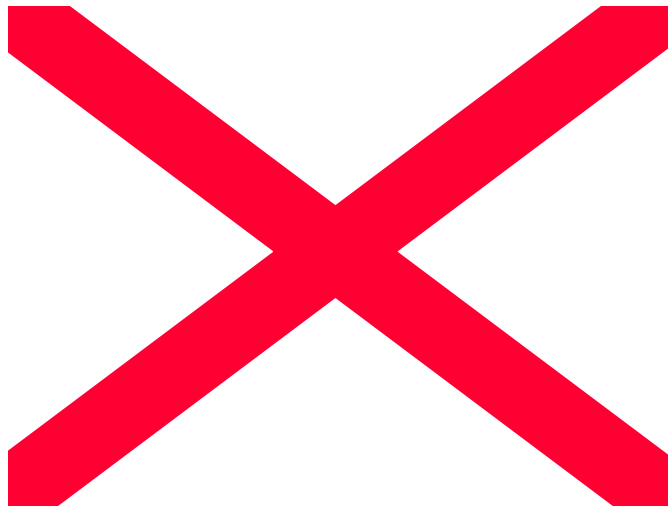
**DIV (REQUIRED):** This is the division code of the individual who disclosed the PHI information. (PFK1 will pull up an assist box listing valid DIV codes. PFK3 will close the assist box.) Valid DIV codes are:

<b>CD</b>	Children's Division
<b>DDP</b>	Information Services & Technology Division
<b>FSD</b>	Family Support Division
<b>DOF</b>	Division of Budget and Finance
<b>DLS</b>	Division of Legal Services
<b>DMS</b>	Division of Medical Services
<b>DYS</b>	Division of Youth Services
<b>DSS</b>	Department of Social Services
<b>DGS</b>	Division of General Services

**COUNTY/LOCATION (REQUIRED):** This is the 3 digit FIPS county code of the individual who disclosed the PHI information. (PFK1 will pull up an assist box listing the valid FIPS County Codes.)

**PHONE (REQUIRED):** This is the telephone number of the individual who disclosed the PHI information.  
(Format: 111999999999, 111=area code 999=7 digit phone number)

**MJI0 – SEARCH BY USERID** (This is a search screen used to find all disclosures made or entered into the system by a specific RACF USERID within a specific start and stop date range.)



**MJI0** – Enter a valid RACF USERID. MOJJIS Administrative Staff can search all userids – everyone else will only be able to search on their own USERID.

**USERID:** This is the RACF USERID of the individual who made or entered the disclosure into the system.

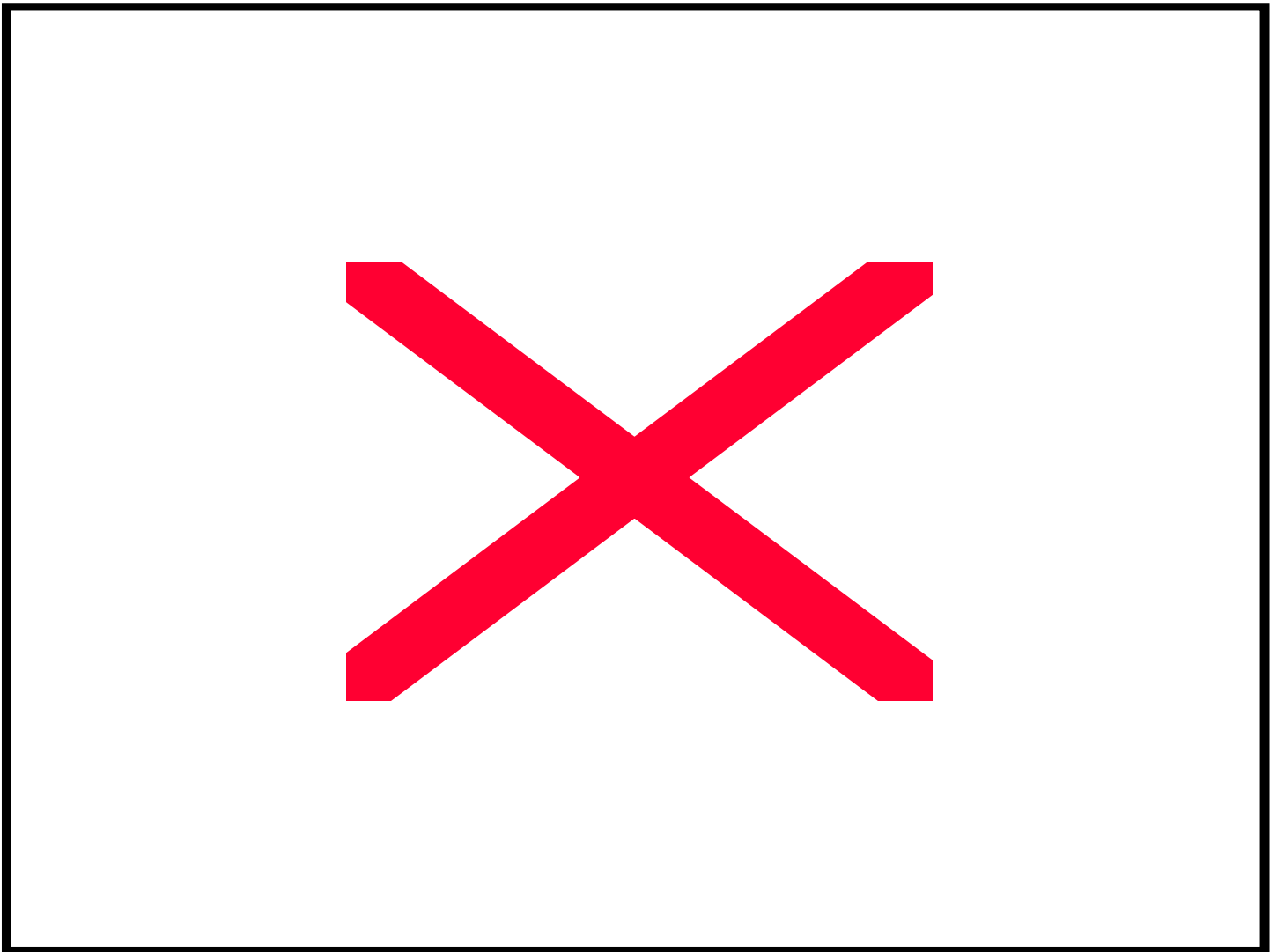
**START/STOP DATES (REQUIRED):** These dates make up the date range for the search. This date range is based on disclosure dates taken from information added on the MJA0 transactions.

Date Format: MMDDCCYY (MM = Month, DD=Day, CC=Century, YY=Year)

**Upon entry of a valid RACF USERID, Start Date and Stop Date, you will receive a list of disclosure records made or entered by a specific userid between the dates specified. Unless you are a MOJJIS Administrative Staff, you will only be able to enter your RACF USERID.**

**You can then select a record to inquire or update detail information by entering an “I” or “U” in front of the record. “I” is for Inquiry and will transfer you to the MJI2 – Inquire by Userid. “U” is for Update and will transfer you to the MJU0 – Update a Disclosure.**

**MJI1 – SEARCH BY DCN** (This is a search screen used to find individual disclosures made or entered by you for a specific DCN within a specific start and stop date range. MOJJIS Administrative Staff will see all individual disclosures for the specific DCN. This search will not include multiple (batch) disclosures. To get a complete listing of disclosures made for a specific DCN, a report will need to be generated by ISTD. MOJJIS Administrator or designee will be the only individual authorized to request a report of accountability.)



**MJI1** – Enter the DCN of the individual who disclosures were made for.

**START/STOP DATES (REQUIRED):** These dates make up the date range for the search. This date range is based on disclosure dates taken from information added on the MJA0 transactions.

Date Format: MMDDCCYY (MM = Month, DD=Day, CC=Century, YY=Year)

Upon entry of a valid DCN, Start Date and Stop Date, you will receive a list of disclosure records made or entered by you for the DCN between the dates specified. MOJJIS Administrative Staff will see all individual disclosures for the DCN.

You can then select a record to inquire or update detail information by entering an “I” or “U” in front of the record. “I” is for Inquiry and will transfer you to the MJI2 – Inquire by Userid. “U” is for Update and will transfer you to the MJU0 – Update a Disclosure.

**MJI2 & MJI3 – INQUIRE ON A SELECTED DISCLOSURE** (This is not an enterable transaction, you must transfer from MJIO or MJII)

Transactions look exactly like MJA0 & MJA1 except you can not enter any information. MJI2 is the 1<sup>st</sup> screen, to get to the rest of the detailed information press enter to pull up MJI3.

**MJU0 & MJU1 – UPDATE A SELECTED DISCLOSURE** (This is not an enterable transaction, you must transfer from MJIO or MJII)

Transactions look and work like MJA0 & MJA1 except they pull back an existing record to be updated. Same edits as MJA0 & MJA1. MJU1 has an additional ERASE feature which can only be used by MOJJIS Administrative Staff. If you entered a record in error and need it erased, you will need to call your MOJJIS Administrative Staff.